IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

LIFF & BERRIDGE, PLC B.O. Box 19928

Alexandria, Virginia 22320 Telephone: (703) 836-6400 Facsimile: (703) 836-2787

Attorney Docket No.: 119212

Date: March 23, 2004

MAIL STOP PATENT APPLICATION

NONPROVISIONAL APPLICATION TRANSMITTAL **RULE §1.53(b)**

Commissioner for Patents P.O. Box 1450

Alexandria, VA 22313-1450

Customer Number: 25944

Sir:

 \boxtimes

By (Inventor):

Transmitted herewith for filing under 37 C.F.R. §1.53(b) is the nonprovisional patent application

For (Title):

FEEDING DEVICE FOR FEEDING RECORDING MEDIUM

	Use Figure for front page of Publication.	
\leq	A Declaration and Power of Attorney is filed herewith.	
7	This application claims benefit of Provisional Application No.	filed

(A Preliminary Amendment is attached to reflect this claim in the Specification if not already present.)

 \boxtimes This patent application is assigned to BROTHER KOGYO KABUSHIKI KAISHA.

The executed Assignment is filed herewith.

An Information Disclosure Statement is filed herewith.

Takamitsu KAWAI

Formal drawings (Figs. 1-12; 12 sheets) are attached.

Entitlement to small entity status is hereby asserted.

A Preliminary Amendment is filed herewith.

Priority of foreign application No. 2003-084795 filed March 26, 2003 in Japan is claimed (35 U.S.C. §119).

A certified copy of the above corresponding foreign application is filed herewith.

This application is NOT to be published under 35 U.S.C. 122(b). The undersigned attorney or agent hereby certifies that the invention disclosed in this application has not and will not be the subject of an application filed in another country, or under a multilateral international agreement, that requires publication of applications 18 months after filing.

 \boxtimes The filing fee is calculated below:

CLAIMS IN THE APPLICATION AFTER ENTRY OF ANY PRELIMINARY AMENDMENT NOTED ABOVE

FOR:	NO. FILED	NO. EXTRA	
BASIC FEE	9 THE TO	3 4 4 4 5 5 Y	
TOTAL CLAIMS	19 - 20	= *	
INDEP CLAIMS	2 - 3	= *	
☐ MULTIPLE DEPENDENT CLAIMS PRESENTED			

^{*} If the difference is less than zero, enter "0".

SMALL ENTITY				
RATE	FEE	<u>OR</u>		
4.44	\$ 385	<u>OR</u>		
x 9=	\$	<u>OR</u>		
x 43 =	\$	<u>OR</u>		
+ 145 =	\$	<u>OR</u>		
TOTAL .	\$	<u>OR</u>		
iling fee is attached. Except as				

OTHER THAN A **SMALL ENTITY**

RATE	FEE	
4.04	\$ 770	
x 18	\$	
x 86	\$	
+ 290	\$	
TOTAL	\$ 770	

Check No. 152438 in the amount of \$770.00 to cover the fi as otherwise noted herein, the Commissioner is hereby authorized to charge any other fees that may be required to complete this filing, or to credit any overpayment, to Deposit Account No. 15-0461. Two duplicate copies of this sheet are attached.

Respectfully submitted,

s A. Olifi Registration No. 27,875

Joel S. Armstrong Registration No. 36,430

JAO:JSA/mxm

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